Tennessee Department of Health **Reportable Diseases and Events**

The diseases and events listed below are declared to be communicable and/or dangerous to the public and are to be reported to the local health department by all hospitals, physicians, laboratories, and other persons knowing of or suspecting a case in accordance with the provision of the statutes and regulations governing the control of communicable diseases in Tennessee (T.C.A. §68 Rule 1200-14-01-.02). See matrix for additional details.

Category 1A: Requires immediate telephonic notification (24 hours a day, 7 days a week), followed by a written report using the PH-1600 within 1 week.

- [002] Anthrax (Bacillus anthracis)^B
- [005] Botulism-Foodborne (Clostridium botulinum)^B
- [004] Botulism-Wound (*Clostridium botulinum*)
- [505] Disease Outbreaks (e.g., foodborne, waterborne, healthcare, etc.)
- [023] Hantavirus Disease
- [096] Measles-Imported
- [026] Measles-Indigenous
- [095] Meningococcal Disease (Neisseria meningitidis)
- [530] Middle East Respiratory Syndrome (MERS)

- [516] Novel Influenza A
- [032] Pertussis (Whooping Cough)
- [037] Rabies: Human [112] Ricin Poisoning^B
- [132] Severe Acute Respiratory Syndrome (SARS)
- [107] Smallpox^B
- [110] Staphylococcal Enterotoxin B (SEB) Pulmonary Poisonina^B
- [111] Viral Hemorrhagic Fever^B

Category 1B: Requires immediate telephonic notification (next business day), followed by a written report using the PH-1600 within 1 week.

- [006] Brucellosis (Brucella species)^B
- [502] Burkholderia mallei infection^B
- [532] Chikungunya
- [010] Congenital Rubella Syndrome
- [011] Diphtheria (Corynebacterium diphtheriae)
- [123] Eastern Equine Encephalitis Virus Infection
- [507] Francisella species infection (other than F. tularensis)B
- [053] Group A Streptococcal Invasive Disease (Streptococcus pyogenes)
- [047] Group B Streptococcal Invasive Disease (Streptococcus agalactiae)
- [054] Haemophilus influenzae Invasive Disease
- [016] Hepatitis, Viral-Type A acute
- [513] Influenza-associated deaths, age <18 years
- [520] Influenza-associated deaths, pregnancyassociated
- [515] Melioidosis (Burkholderia pseudomallei)

- [102] Meningitis-Other Bacterial
- [031] Mumps
- [033] Plaque (Yersinia pestis)^B
- [035] Poliomyelitis-Nonparalytic
- [034] Poliomyelitis-Paralytic
- [119] Prion disease-variant Creutzfeldt Jakob Disease
- [109] Q Fever (Coxiella burnetii)^B
- [040] Rubella
- [041] Salmonellosis: Typhoid Fever (Salmonella Typhi)
- [131] Staphylococcus aureus: Vancomycin nonsensitive - all forms
- [075] Syphilis (Treponema pallidum): Congenital
- [519] Tuberculosis, confirmed and suspect cases of active disease (Mvcobacterium tuberculosis complex)
- [113] Tularemia (Francisella tularensis)^B
- [108] Venezuelan Equine Encephalitis Virus Infection^B

Category 2: Requires written report using form PH-1600 within 1 week.

- [528] Acinetobacter species, Carbapenem-resistant^L
- [501] Babesiosis
- [003] Botulism-Infant (*Clostridium botulinum*)
- [121] California/LaCrosse Serogroup Virus Infection
- [007] Campylobacteriosis (including EIA or PCR positive stools)
- [526] Carbon Monoxide Poisoning
- [503] Chagas Disease
- [069] Chancroid
- [055] Chlamydia trachomatis-Genital
- [057] Chlamydia trachomatis-Other
- [009] Cholera (Vibrio cholerae)

- [001] Cryptosporidiosis (Cryptosporidium species)
- [106] Cyclosporiasis (Cyclospora species)
- [504] Dengue Fever
- [522] Ehrlichiosis/Anaplasmosis Any
- [506] Enterobacteriaceae, Carbapenem-resistant
- [060] Gonorrhea-Genital (Neisseria gonorrhoeae)
- [064] Gonorrhea-Ophthalmic (Neisseria gonorrhoeae)
- [061] Gonorrhea-Oral (Neisseria gonorrhoeae)
- [062] Gonorrhea-Rectal (Neisseria gonorrhoeae)
- [133] Guillain-Barré syndrome
- [022] Hansen's Disease [Leprosy] (Mycobacterium leprae)

Category 2: Requires written report using form PH-1600 within 1 week. (continued)

- [058] Hemolytic Uremic Syndrome (HUS)
- [480] Hepatitis, Viral-HbsAg positive infant
- [048] Hepatitis, Viral-HbsAg positive pregnant female
- [017] Hepatitis, Viral-Type B acute
- [018] Hepatitis, Viral-Type C acute
- [021] Legionellosis (Legionella species)
- [094] Listeriosis (*Listeria* species)
- [024] Lyme Disease (Borrelia burgdorferi)
- [025] Malaria (*Plasmodium* species)
- [521] Powassan virus infection
- [118] Prion disease-Creutzfeldt Jakob Disease
- [533] Pseudomonas species, Carbapenem-resistant^L
- [036] Psittacosis (Chlamydia psittaci)
- [105] Rabies: Animal
- [122] St. Louis Encephalitis Virus Infection
- [042] Salmonellosis: Other than S. Typhi (Salmonella species)
- [517] Shiga-toxin producing Escherichia coli (including Shiga-like toxin positive stools, E. coli O157 and E. coli non-O157)
- [043] Shigellosis (Shigella species)
- [039] Spotted Fever Rickettsiosis (*Rickettsia* species including Rocky Mountain Spotted Fever)

- [518] Streptococcus pneumoniae Invasive Disease (IPD)
- [074] Syphilis (*Treponema pallidum*): Cardiovascular
- [072] Syphilis (*Treponema pallidum*): Early Latent
- [073] Syphilis (*Treponema pallidum*): Late Latent
- [077] Syphilis (Treponema pallidum): Late Other
- [076] Syphilis (*Treponema pallidum*): Neurological
- [070] Syphilis (Treponema pallidum): Primary
- [071] Syphilis (Treponema pallidum): Secondary
- [078] Syphilis (*Treponema pallidum*): Unknown Latent
- [044] Tetanus (Clostridium tetani)
- [045] Toxic Shock Syndrome: Staphylococcal
- [097] Toxic Shock Syndrome: Streptococcal
- [046] Trichinosis
- [101] Vancomycin resistant enterococci (VRE) Invasive Disease
- [114] Varicella deaths
- [104] Vibriosis (Vibrio species)
- [125] West Nile virus Infections-Encephalitis
- [126] West Nile virus Infections-Fever
- [124] Western Equine Encephalitis Virus Infection
- [098] Yellow Fever
- [103] Yersiniosis (Yersinia species)

Category 3: Requires special confidential reporting to designated health department personnel within 1 week.

- [500] Acquired Immunodeficiency Syndrome (AIDS)
- [512] Human Immunodeficiency Virus (HIV)
- [525] All CD4+ T-cell and HIV-1 Viral Load testing results from those laboratories performing these tests

Category 4: Laboratories and physicians are required to report all blood lead tests. Levels ≥ 5µg/dl should be reported within 1 week. Levels < 5µg/dl should be reported within 1 month.

[514] Lead Levels (blood)

Category 5: Events will be reported monthly (no later than 30 days following the end of the month) using the designated reporting mechanism. For Healthcare Associated Infections, events should be reported via the National Healthcare Safety Network (NHSN – see http://health.state.tn.us/ceds/hai/index.htm for more details); Clostridium difficile Infection and Staphylococcus aureus: Methicillin resistant Invasive Disease (Davidson County residents only) will also be reported monthly to the Emerging Infections Program (EIP). For Neonatal Abstinence Syndrome (NAS), a diagnosis should be reported using the NAS reporting portal (http://health.tn.gov/MCH/NAS/index.shtml).

- [531] Clostridium difficile Infection^L
- [523] Healthcare Associated Infections, Catheter Associated Urinary Tract Infections
- [508] Healthcare Associated Infections, Central Line Associated Bloodstream Infections
- [509] Healthcare Associated Infections, *Clostridium difficile*
- [524] Healthcare Associated Infections, Dialysis Events
- [529] Healthcare Associated Infections, Healthcare Personnel Influenza Vaccination

- [510] Healthcare Associated Infections, Methicillin resistant *Staphylococcus aureus* positive blood cultures
- [511] Healthcare Associated Infections, Surgical Site Infections
- [130] Staphylococcus aureus: Methicillin resistant Invasive Disease^L
- [527] Neonatal Abstinence Syndrome

